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COVER LETTER

Division of Corporations
SUBJECT: X-Pert Property Preservation Services LLC Name of Limited Liability Company
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Oeorge A. Mojia
Xpa+ Property Proservation Services LLC
4504 N.W 1925+
Address
Miami FL 33055
City/State and Zip Code XPC+PP 5 Q QMQi COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
George Mejia at (305), 305 - 5292 Name of Person Name of Person Name of Person
Enclosed is a check for the following amount:
\$25.00 Filing Fee Sectificate of Status Sectified Copy (additional copy is enclosed) S25.00 Filing Fee Sectified Copy (additional copy is enclosed) S25.00 Filing Fee Sectified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

X-PERT PROPERTY PRESERVATION SERVICES LLC

(Name of the Limit	ed Liability Company (A Florida Limited Lia	as it now appears on our re bility Company)	cords.)		
The Articles of Organization for this Limited L Florida document number L1700013	iability Company w	ere filed on $\frac{\sqrt{2}}{\sqrt{2}}$	<u> </u>	and assign	ned
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name of	f the limited liabilit	ty company here:			
The new name must be distinguishable and contain the w	ords "Limited Liability	Company," the designation	'LLC" or the a	hbreviation "L.L.(
Enter new principal offices address, if applic	able:			S 28	
(Principal office address MUST BE A STREE	T ADDRESS)			ALL:	-
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	- <u>BOX)</u> - -			R24 AMII:29	
B. If amending the registered agent and/ registered agent and/or the new registered of		ce address on our rec	ords, <u>enter</u>	the name of	the nev
Name of New Registered Agent:	George	Mejia			
New Registered Office Address:	4504	N.W 192 Enter Florida street ac	5+ Idress		
	miami		, Florida	33055	5
	1.11 1	City	,	Zip Code	
New Registered Agent's Signature, if changing I	Segistared Agents				

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	yisela Mejia	4504 NW 1925t	🗆 Add
	1	4504 NW 1925+ miami, FL 33055	⊠ ¹Remove
			Change
MGR	George Mejia	4504 N.W 1925+ miami, FL 33055	⊠ lAdd
		miami, FL 33055	Remove
			Change
			Remove
			Change
			Add
			Remove
			Change
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n effec <u>te:</u>	re date, if other than the date of filing: etive date is listed, the date must be specific and cannot be prior to date of filing or mor f the date inserted in this block does not meet the applicable statutory filing nt's effective date on the Department of State's records.	e than 90 days after filing.) Pursuant to 605,020
reco he S	ord specifies a delayed effective date, but not an effective tir 90th day after the record is filed.	ne, at 12:01 a.m. on the earlier o
ed _	april 17 . 2019.	
	Signature of a member or authorized representative o	
	Signature of a member or authorized representative o	f a member
	Visela Mejia	

Page 3 of 3

Filing Fee: \$25.00